

FORM COR-PAC

CORRECTION/AMENDMENT AFFIDAVIT FOR POLITICAL COMMITTEE

6 pages

1 ACCOUNT #		2 Total pages filed: 8 pages	OFFICE USE ONLY	
3 COMMITTEE NAME	EL PASOANS for traditional family values		Date Received	
4 TREASURER NAME	Ronald Webster		2012 FEB 27 CITY CLERK DEPT.	
5 ORIGINAL REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> 8th day before election		<input type="checkbox"/> Runoff <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Dissolution Report <input type="checkbox"/> Other (specify _____)	
6 ORIGINAL PERIOD COVERED	Month Day Year JAN / 1 / 2011 THROUGH JUNE / 31 / 2011		Date Hand-delivered or Postmarked Receipt # Amount Date Processed Date Imaged	

7 EXPLANATION OF CORRECTION

SEE REASONS for correction Amendment

8 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

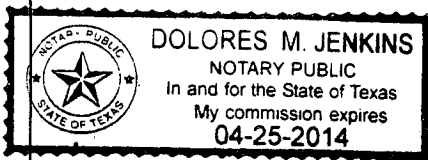
Check ONLY if applicable:



Semiannual reports: This report is an amendment/correction to a semiannual report due on or after September 1, 2011. If amendment/correction is filed on, or after the eighth day after the original report was filed, I swear, or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.



Other reports (excluding semiannual reports due on or after September 1, 2011): I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.



AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Campaign Treasurer

Sworn to and subscribed before me, by the said Ronald J. Webster, this the 27th day of February

2012, to certify which, witness my hand and seal of office.

Dolores M. Jenkins

Dolores M. Jenkins

Notary

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

Remember To Attach Any Part Of The Campaign Finance Report Form
Needed To Report And Explain Corrections

CITY CLERK DEPT.

2012 FEB 27 PM 3:34

23 February 2012

Reasons for a correction amendment-
from January 1, 2011 through June 30, 2011
El Pasoans for traditional family values
was dormant, but we did not disband.
We were concerned about sustaining the
ordinance as it was voted on November 2, 2010.
We had several officer changes- And we had
no campaign finance activity to report.
We have maintained contact with the
Texas Ethics Commission to seek their
counsel and help in making proper
filings.

Respectfully yours
Ronald Webster
treasurer for EPTFV
Box 131
El Paso, Texas 79941

RESPECTFULLY SUBMITTED
MALCOLM McGRYON III
SECRETARY EPTFV
1007 N. MESA ST
EL PASO, TEXAS, 79902

SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM SPAC COVER SHEET PG 1

The SPAC Instruction Guide explains how to complete this form.

1 ACCOUNT #
(Ethics Commission Filers)2 Total pages filed:
6 pages

3 COMMITTEE NAME

EL PASOANS FOR TRADITIONAL FAMILY VALUES

OFFICE USE ONLY

Date Received

CITY CLERK DEPT.
2012 FEB 27 PM 3:044 COMMITTEE
ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

BOX 131 EL PASO, TEXAS 79941☐ change of address

Date Hand-delivered or Postmarked

Receipt #

Amount

Date Processed

Date Imaged

5 CAMPAIGN
TREASURER
NAME

MS / MRS / MR

FIRST

MI

RONALD**F**

NICKNAME

LAST

SUFFIX

WEBSTER6 CAMPAIGN
TREASURER'S
STREET ADDRESS
(residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

501 EAST PAISANO DRIVE EL PASO TEXAS 799017 CAMPAIGN
TREASURER'S
MAILING ADDRESS

STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

306 EAST PAISANO 382 EL PASO, TEXAS 79901☐ change of address8 CAMPAIGN
TREASURER
PHONE

AREA CODE PHONE NUMBER EXTENSION

(915) 533-0248

9 REPORT TYPE

☐ January 15
☒ July 15☐ 30th day before election
☐ 8th day before election
☐ Runoff☐ Exceeded \$500 limit
☐ Dissolution (attach PAC-DR)
☐ 10th day after campaign treasurer termination10 PERIOD
COVERED

Month Day Year

JAN / 1 / 2011

THROUGH

Month Day Year

JUNE / 31 / 2011
2011

11 ELECTION

ELECTION DATE
Month Day Year**/ /**

ELECTION TYPE

☐ Primary☐ Runoff☐ General☐ Special**RW**

GO TO PAGE 2

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

**FORM SPAC
COVER SHEET PG 2**

12 COMMITTEE NAME <i>6 PASOANS for traditional family values</i>		ACCOUNT # (Ethics Commission Filers)	
13 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.) <input checked="" type="checkbox"/> SUPPORT (Candidate or Measure) <input type="checkbox"/> OPPOSE (Candidate or Measure) <input type="checkbox"/> ASSIST (Officeholder)	<input type="checkbox"/> CANDIDATE <input type="checkbox"/> OFFICEHOLDER	CANDIDATE / OFFICEHOLDER NAME	
		OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)	
	<input checked="" type="checkbox"/> MEASURE	BALLOT IDENTIFICATION / #	
		ELECTION DATE Month / Day / Year	
		DESCRIPTION <i>TRADITIONAL family values ORDINANCE # 017456</i>	
14 CONTRIBUTION TOTALS EXPENDITURE TOTALS CONTRIBUTION BALANCE OUTSTANDING LOAN TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED		\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 0.00
	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED		\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES		\$ 0.00
	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 676.57
	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 0.00

15 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20 _____, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

2012 FEB 27 PM 3:34

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <i>one page, 6 pages</i>	
2 FILER NAME <i>EL PASO COUNTY FOR TRADITIONAL FAMILY VALUES</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>JUNE 31 2011</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: 6 Contributor address; City; State; Zip Code	7 Amount of contribution (\$) <i>\$ 0.00</i>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
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Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 1 page 2 FILER NAME El PASOANS for traditional family values 3 ACCOUNT # (Ethics Commission Filers)

4 Date JUNE 31, 2011 5 Payee name NONE

6 Amount (\$) \$ 0.00 7 Payee address; City; State; Zip Code NONE

8 PURPOSE OF EXPENDITURE (a) Category (See categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T)

9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date Payee name

Amount (\$) Payee address; City; State; Zip Code

PURPOSE OF EXPENDITURE Category (See categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T)

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Revised 09/28/2011